DOCUMENT RESUME

ED 238 096 CG 018 298

AUTHOR Anderson, Cordelia
TITLE Child Sexual Abuse Prevention: How to Take the First Steps.
INSTITUTION Illusion Theater, Minneapolis, MN.
PUB DATE 83
NOTE 35p.
AVAILABLE FROM Network Publications, ETR Associates, 1700 Mission Street, Suite 203, P.O. Box 8506, Santa Cruz, CA 95061-8506 ($8.50).
PUB TYPE Guides - Non-Classroom Use (055)

EDRS PRICE MF01/PC02 Plus Postage.
DESCRIPTORS Adolescents; *Child Abuse; Children; Guidelines; *Prevention; *Program Development; *Resource Materials; *Sexual Abuse

ABSTRACT

This booklet provides advice and guidelines for persons interested in developing and implementing child sexual abuse prevention programs. Eight steps to child sexual abuse prevention are outlined. Step 1 involves recognition that child sexual abuse can be prevented, and provides facts to use when discussing sexual abuse. Step 2 highlights ways of identifying and contacting community resources and services for prevention programming. Step 3 suggests ways to answer community concerns about child sexual abuse prevention education. Step 4 presents operating assumptions used by Illusion Theater, the guide developer, which can serve as a basis for a prevention program philosophy. Step 5, Getting Started, provides guidelines for the size and scope of a program, setting reasonable goals, and gaining access to schools. Phases in developing a child sexual abuse prevention education program are listed and a flow chart of general program development is included. Step 6, Using Existing Resources, lists Illusion Theater resources, and books, curricula, films, videotapes, booklets and miscellaneous materials from other sources. Step 7 discusses evaluation concerns and lists several programs that conducted evaluations. The final step, Moving Toward Prevention, gives suggestions to help society move toward the prevention of child sexual abuse. A list of prevention contacts is also provided. (NRB)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

illusion theater

ED258096

CHILD SEXUAL
ABUSE PREVENTION

how to tell
the first steps

CG 018298

ACKNOWLEDGEMENTS

This booklet is the result of input and assistance by several people with whom we've worked to develop child sexual abuse prevention programs throughout the country.

Special thanks are due to all these people. Particular thanks are due to those who helped compile and produce TAKING THE FIRST STEPS: Margie Singher-Burton and Peggy Miller, Sexual Offense Services of Saint Paul, Minnesota; Carol Plummer, Bridgework Theater, Goshen, Indiana; Geri Crisci, Prevention Consultant, Northhampton, Massachusetts; Sherry Arndt, PHN, Former Coordinator Project TRUST, Grand Rapids, Minnesota; Joe Strikowski, Minoqua School District, Wisconsin for reviewing various drafts of the booklet.

Special thanks also to Mary Venier, Jill Applegate and Nancy Riestenberg, Illusion Theater for research, editing, typing, and to the entire staff for their efforts in conducting and helping to produce our sexual abuse prevention program.

The completion of this booklet and of other related material would not have been possible without the generosity of Bob Larranaga of Associates and Larranaga. Special thanks are due also to Sandy Johnson, Dana Offerman, Brent Lawrence, Kelly Gothier, Bob Bakken and Darlene Menne.

Booklet illustration and design is the creation and contribution of Warren Hanson. We are thankful to him for the generous gift of his artistic talent.

The printing credits and thank you's go out to John House of Mastercraft Printing, Incorporated for the printing of this project.

This project is made possible, in part, through a grant from the Venture Project of the Saint Paul Ramsey United Arts Council, with support from the Dayton Hudson Foundation. Other funds have been contributed by: Northwestern National Life Insurance Company, Saint Paul Companies and the Saint Paul Foundation.

Thank you for making this possible.

CHILD SEXUAL ABUSE PREVENTION: HOW TO TAKE THE FIRST STEPS

Written by
Cordelia Anderson, M.A.
Director Child Sexual Abuse
Prevention Program
(Applied Theater)
Illusion Theater

U.S. DEPARTMENT OF EDUCATION
NATIONAL INSTITUTE OF EDUCATION
EDUCATIONAL RESOURCES INFORMATION
CENTER (ERIC)

X This document has been reproduced as received from the person or organization originating it.

☐ Minor changes have been made to improve reproduction quality.

• Points of view or opinions stated in this document do not necessarily represent official NIE position or policy.

"PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY

Cordelia Anderson

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."

TYPESETTING BY
ASSOCIATES AND LARRANAGA

ARTWORK BY
WARREN HANSON

© 1983

CG 018298

Dear Friend:

TAKING THE FIRST STEPS results from our experience first developing and then implementing a child sexual abuse prevention program. The purpose of the booklet is to share with you what we've learned about how to get a prevention program going in your community. The booklet provides advice and guidelines and directs you to educational resources and services available from Illusion Theater and other prevention programs.

For those of you who are not familiar with our prevention work, our program originated in 1977 in the Hennepin County Attorney's Office (HCAO) when Illusion Theater collaborated with Sexual Assault Services to create TOUCH, a prevention play for children. The program outgrew the prosecution focus of the HCAO and in 1980 became a part of Illusion Theater as the Applied Theater Program — a combination of social services and theater. Illusion Theater began in 1974 and still continues its artistic mission to collaborate and create original plays which address the concerns of men, women and children.

Our child sexual abuse prevention program, plays and training workshops have reached over 280,000 people in 33 states. Our curricula and other educational materials are in every state and are being requested internationally.

From September 1980 through September 1983, we received funds from the United States Department of Health and Human Services-National Council on Child Abuse and Neglect (HHS-NCCAN). The first two years of funds were to coordinate and evaluate five other prevention programs. The last year was to serve as a National Clearinghouse for child sexual abuse prevention programs. In spring, 1983, Illusion Theater was selected by the National Center for the Prevention and Control of Rape (NCPCR) as an exemplary state-of-the-art sexual abuse prevention program.

It is from this experience and dedication to prevention that we produced TAKING THE FIRST STEPS. It is our hope that prevention efforts will continue to grow. It is our belief that you can help prevention child sexual abuse and that TAKING THE FIRST STEPS will help you.

Sincerely,

Cordelia Anderson

Cordelia Anderson, M.A.

CHILD SEXUAL ABUSE PREVENTION: HOW TO TAKE THE FIRST STEPS

STEP 1 Recognize That Child Sexual Abuse Is A Problem That Can Be Prevented

STEP 2 Identify And Contact Resources And Services In Your Community

STEP 3 Answer Community Concerns About Child Sexual Abuse Prevention Education

STEP 4 Develop A Basic Philosophy

STEP 5 Decide How To Get Started

STEP 6 Use Existing Resources

STEP 7 Think About Evaluation

STEP 8 Move Toward Prevention

CLOSING

APPENDIX

Prevention Contacts
Bibliography And Resources
Resource Information

ENCLOSED

Illusion Theater Resource Order Form

RECOGNIZE THAT CHILD SEXUAL ABUSE IS A PROBLEM THAT CAN BE PREVENTED

People are not interested in preventing anything unless they understand it's a problem. Unfortunately, since sexual abuse is seldom talked about or reported, local, state or federal statistics may not accurately illustrate the scope of the problem.

Low statistics probably do not mean cases are not there, just that few people talk about them or believe they occur. The frequent result of training professionals to understand and identify sexual abuse and directly educating children and parents is an increase in the number of cases reported.

People do not want to believe sexual abuse could happen to "their children" or in "their community" or by "their friend or relative," but it does. Over 80% of the sexual abuse of children is by someone the child knows, not a stranger. When you allow yourself to think about this fact, you can understand how sexual abuse happens as much in rural communities as in urban communities, and at every socio-economic level.

As a first step toward prevention we must begin to realize that sexual abuse is common. It is happening in your community—wherever you live. Researchers are finding that approximately one in four girls, and one in ten boys by the age of 18 are sexually abused.

step 1

However, accepting that sexual abuse is a problem is not enough, and we must be willing to take some type of action to prevent it. Treatment services for sexual abuse victims and offenders is tertiary prevention and it is important because it can help minimize the long-term effects of abuse. Many children who are victims of sexual abuse suffer effects such as chemical abuse, learning problems, delinquent behavior, health disorders and feelings of shame, guilt, fear or low self-esteem. Treatment can also help sex offenders to acknowledge their responsiblity for the abuse, to accept the damage caused by their actions and to change their behavior. Treatment for both victims and offenders is critical to prevention because it begins to break cycles of victimization and abuse.

Secondary prevention involves intervention to stop an assault from occurring. Through early identification of a problem or self defense, including assertive communication, we are better equipped to protect ourselves and to stop an assault.

Primary prevention programs attempt to identify and change societal beliefs, values and norms which perpetrate sexual abuse and exploitation. One of these areas is the power structure in our society which sets up males as more powerful than females, Caucasians as more powerful than people of color and adults as more powerful than children.

Children are vulnerable to adults and look to adults for protection. Most children who are victims of sexual abuse are tricked, not forced by the offender. The offender is likely to be someone the child knows and trusts and the child may not believe this person would hurt her/him. Primary prevention efforts such as direct education programs for children inform them of their right to trust their feelings, to say "no" and to tell someone about any touch or behavior that confuses, scares or hurts them. Without information and support for disclosing, it is unlikely that a child would talk about a sexual assault.

Since the first step involves awareness of the program, use the media (newspapers, television, radio) to publicize the incidences of child sexual abuse as an effective way to inform large numbers of people about the scope of the problem. General information, through stories, editorials, public service announcements, news and talk shows or highly publicized cases often result in an increased interest in prevention efforts. This becomes an excellent opportunity to educate people about prevention resources and to enlist their support for local prevention programs.

FACTS TO USE WHEN DISCUSSING SEXUAL ABUSE

It is useful for advocates of child sexual abuse prevention programs to compile local and national statistics on sexual abuse and to disseminate this information through awareness presentations.

Statistics vary slightly depending on the reference source. It is difficult to know the exact number of cases which occur because of the limitations of the studies done and the fact that many victims of sexual abuse do not report it. With these considerations and limitations in mind, the following are some statistics on the problem of child sexual abuse:

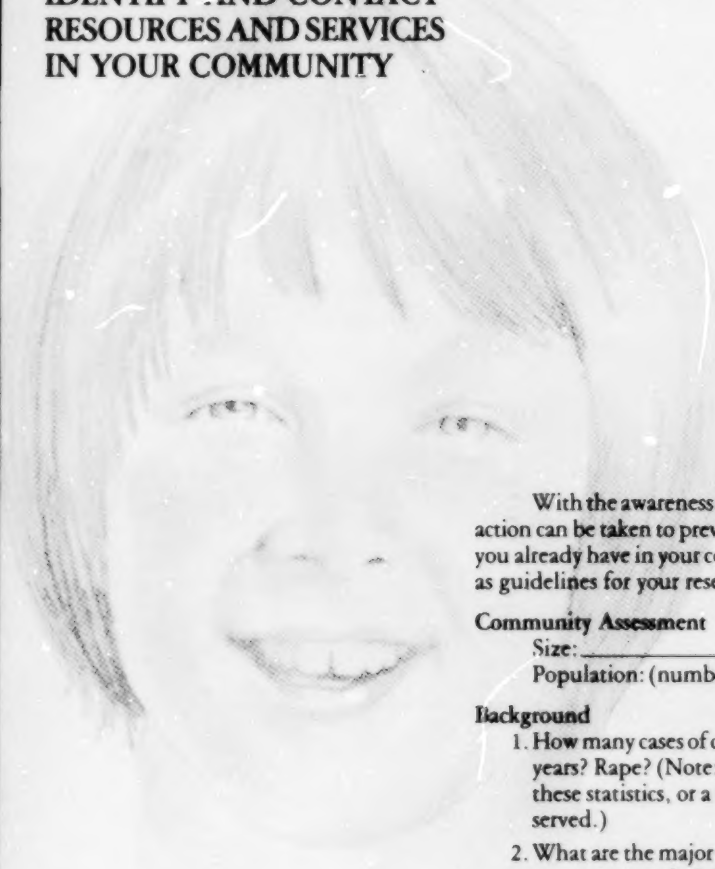
- 15-38% of all girls and 3-10% of all boys are victims of sexual abuse before the age of eighteen. (D. Finkelhor, 1982; Diane Russell, 1981; King County Rape Relief, 1979; J.T. Landis, 1956)
- Over 90% of the abusers are men. (National Center of Child Abuse and Neglect, 1981)
- 70-85% of children are sexually abused by someone that they know. (King County Rape Relief, Washington; Minnesota Program for Victims of Sexual Assault, Saint Paul, Minnesota; Ann Burgess, 1975; Vincent De Francis, 1969)
- Most incidences (two-thirds) of child sexual abuse are not reported to any adult. (*Newsweek Magazine*, August 9, 1981)
- 33% of sex offenders had some form of sexual trauma as children (in comparison with the finding that only 1/10 of adult male non-offenders report similar victimization in their lives). (A.N. Groth, 1979, *Men Who Rape*) While this does *not* mean that all children who are abused grow up to be offenders, it does illustrate the importance of early intervention.
- In a study conducted by Tory Haden at the University of Minnesota, it was found that 77% of 110 children who are elective mutes were abused.
- Clinical experience suggests that many of the children and adolescents expoloited sexually for prostitution were victims of incest. It is likely that a history of being sexually exploited by family members increases a child's susceptibility to sexual exploitation by others, particularly when the child is a runaway. (J. Meyerding, "Early Sexual Experience and Prostitution, "*American Journal of Psychiatry* 134[12]"1381-1385, December, 1977)

- 33% of teenage prostitutes were sexually abused in their home by a family member and 65% were sexually assaulted by non-family members. (*The Enablers Study, The Link*, 1979)
- Child sexual abuse is not restricted to any one social or economic class. (Burgess, Finkelhor, Sandford)
- Pornography is a $5.5 billion-a-year business. (Women Against Violence Against Women in Media) Note: The impact or role of pornography in the awareness of sexual abuse is debatable. We believe that violent, exploitive and abusive images of women and children give the idea that sexual abuse is acceptable and grossly confuse healthy sexuality with the abusive use of sex. Therefore, while pornography may not be the sole cause of sexual abuse, it does perpetuate it.

DEFINITION

Sexual abuse occurs when a person is manipulated, tricked or forced into touch or sexual contact. A useful definition of sexual abuse to use with children is: forced or tricked touch or sex. This touch can begin anywhere on your body and may mean the person touches your breasts, buttocks, vagina or penis. Sexual abuse can also involve oral, anal or vaginal penetration. Rape is sexual abuse with penetration. For children, a way to discuss penetration is to say that one part of a person's body (finger, tongue or penis) goes into a part of another person's body (vagina, anus, mouth). Penetration may occur with an object or a body part. There is also sexual abuse without touch, like exposing—someone forces or tricks another person to look at their genitals or a person may force or trick a child into exposing her / his own genitals. Another type of sexual abuse without touch is an obscene phone call—a person calls and talks about sex (ways he wants to touch a person's body or have that person touch his).

IDENTIFY AND CONTACT RESOURCES AND SERVICES IN YOUR COMMUNITY



step 2

With the awareness that sexual abuse is a common problem and that action can be taken to prevent it, the next step is finding out what resources you already have in your community. The following questions can be used as guidelines for your research and as a local resource list.

Community Assessment

Size: _____ ☐ Urban ☐ Rural ☐ Suburban

Population: (number and composition) _____

Background

1. How many cases of child sexual abuse were reported in the past three years? Rape? (Note: Call police and / or child protection services for these statistics, or a rape center or hospital for the number of clients served.)
2. What are the major agencies for treatment / counseling / self-help in your community? Do they have special services for sex offenders (adults / juveniles), victims of sexual abuse (males / females / children / adults), incest (victims / offenders / families)?
3. Are there any local hotlines? If so, are they 24-hour? Do they receive special training to assist rape, sexual abuse or incest victims?
4. Who are community "experts" on rape, child sexual abuse and incest prevention? (Note: If this is unknown, ask above agencies, including police and child protection services for contact names in your community or neighboring communities. If you don't find contacts, try your state department of public welfare, education or corrections.)
5. What are the state laws regarding: rape / sexual abuse; incest; child abuse reporting?
6. What training and education efforts have already been conducted?
   - ☐ rape awareness
   - ☐ mandatory reporting laws
   - ☐ child abuse (physical, emotional, neglect)
   - ☐ child sexual abuse
   - ☐ incest
   - ☐ child sexual abuse prevention education and curricula
   - ☐ other _____
   - ☐ treatment approach
   - ☐ sex offenders conduct
   - ☐ adult sexual abuse prevention
   - ☐ child sexual abuse prevention
   - ☐ models for working with blind, deaf, mentally retarded or physically handicapped populations

What has been happening in terms of "prevention?"

1. Are police (liaison officers, juvenile officers, investigators) conducting any education in schools on safety or law ("Officer Friendly")? If yes, does it include any discussion of body safety or sexual abuse? If yes, does this component only cover attacks by a stranger, or does it include sexual abuse by an acquaintance or relative?
2. Do the human services such as rape centers, mental health centers, family services, conduct awareness or training sessions in the community or schools on rape, sexual abuse or incest prevention? If yes, for whom is the information available? Preschool, elementary or secondary students? Parents? Professionals? Educational staff? Others? What is the scope of the education (e.g., length of time, educational materials or visual aids used)? What needs to be added or changed?
3. Do the schools have sexual abuse awareness classes? How often? For what grades? What is the content? Who teaches it? What other special curricula are taught (chemical abuse, sexuality, family life, etc.)?
4. Are there any protection (self-defense) classes available? For women? Men? Children? Who teaches these classes? What's the cost? Are they credible?
5. Has anyone had contact with any prevention projects? If so, with which? Has anyone seen Illusion Theater's TOUCH (elementary), NO EASY ANSWERS (secondary) or training seminars? If so, where?

Scope of Prevention Efforts

1. What are your goals in implementing a prevention program? (e.g., Teach in one school? One school district? Parent's groups? Train others to teach? Add or expand prevention education to existing services?)
2. Is the focus of the prevention effort toward community awareness? Professional training? Curriculum implementation? Other?
3. Do you see yourself or the agency you represent as being or becoming the prevention education center for your community? Or becoming the catalyst or force to motivate others to implement such a program?
4. Are you interested in using theater in your prevention approach? As a community awareness tool? As a catalyst to motivate the community to a prevention program (with or without theater)? As an ongoing and integral component of the effort? By purchasing a license to perform TOUCH or NO EASY ANSWERS? By creating a new play?
5. Do you foresee the development of other media such as puppet shows or slide presentations?
6. How many staff or volunteers are available to develop and implement the program? From what agencies? (e.g., social services, rape centers, Junior League Women).
7. Are any funds or in-kind services available for the program?
8. Where do you think you'll find support for this project?
9. Where do you expect to run into problems?
10. Is the community aware that child sexual abuse is a problem?
11. Has there been newspaper, TV or radio coverage of child sexual abuse incidents?

Involve as many local agencies and groups as possible. The following are suggestions of people to inform of the project and / or to ask for direct aid (financial, staff, support, information, services, etc.) Identify an appropriate contact person wherever possible.

Contact:

_____ Schools (board, principal, administrators, curriculum committee, counselors, social workers, nurses)
_____ Parent teacher organizations
_____ Rape centers
_____ Hotlines
_____ Shelters or crisis centers
_____ Mental health centers
_____ YWCA / YMCA
_____ Churches and church youth groups
_____ Police / sheriff's department
_____ County / district attorney
_____ Child protection services / social service / welfare / child abuse team
_____ Hospitals (emergency rooms, crisis units, counseling services)
_____ Local counseling, therapy centers
_____ Clubs (Junior League, Jaycees, Kiwanis, Rotary, Jewish Council, etc.)
_____ Task forces on related topics (family violence, prostitution, health, safety, child abuse, community concerns)
_____ Other

Identify sources for funding and support

Despite the fact that it is a difficult time to obtain funds to support educational materials or a new project, many people are successful at securing funds for prevention efforts. Common sources of funding have been: foundations, businesses and corporations, banks, government agencies (state departments of education, health and welfare and corrections), artistic support organizations (when using theater), churches and religious organizations philanthropic organizations, community groups such as Junior League, Kiwanis, Jaycees, Rotary Club and individuals.

ANSWER COMMUNITY CONCERNS ABOUT CHILD SEXUAL ABUSE PREVENTION EDUCATION

- **"Child sexual abuse is not really that big of a problem here."**

If your local statistics indicate that child sexual abuse is rare, it is likely that cases simply are not being reported. (See STEP 1 for frequency statistics.)

- **"We do not have enough treatment or rehabilitation services."**

Back in 1978 when Illusion Theater first went on the road with our prevention efforts, we were concerned that the program should not be taken anywhere that did not have adequate treatment resources for victims and offenders. Then we realized that, although it is critical to be responsible to people who've already been victims of sexual abuse, we are a prevention program. Why wait until there are more victims and victim services to try to do something about decreasing the number of victims?

If the concern is opening up pain and problems for which there is no help, keep in mind that by informing children that sexual abuse is not their fault, that they are believed, that they are not alone, and that they have a right to say "no" to unwanted touch, we may be providing some relief from the burden of secrecy and shame.

- **"Won't this information scare children?"**

Children are constantly barraged with messages making them wary of dangerous strangers who are going to get them, though it is unclear to the child exactly what the stranger is going to do. Most children see frightening, violent television shows which depict a wide array of assaults. This information *is* scary.

When we ask children the meaning of sexual abuse, it is not uncommon for them to conjure up frightening images of kidnappers, murderers and countless "strange" or "weird men" jumping out of bushes! Prevention programs that define sexual abuse and empower children with balanced information and skills to protect themselves are not scary. Children can handle accurate information if adults can handle giving it to them.

- **"By giving children this information they will make up false reports of sexual abuse."**

Few children lie about sexual abuse. Sex is embarrassing to talk about, and the child is likely to fear being blamed or disbelieved. If a child wants attention or to get back at someone, there are easier ways to do it.

- **"By giving children this information they will try it out."**

In prevention programs, children learn sexual abuse is very serious: it is never okay to force or trick another person into sex or touch. Children are less likely to experiment with such behavior when they clearly understand such behavior is not condoned.

- **"Parents will not be supportive of prevention education given to their children by someone else."**

According to a Boston study conducted by Dr. David Finkelhor, only 29% of the parents gave their children information about sexual abuse despite their awareness of the prevalence of child sexual abuse. However, 89% supported prevention education for their children.

The fact that our audience size for performances of TOUCH and NO EASY ANSWERS averages over 450 indicates a strong interest on the part of parents to educate their childen about sexual abuse. Although parents are concerned about the explicitness of child sexual abuse education and how it is presented, they are also concerned with their children's safety.

Since October 1980, Project TRUST* (Teaching-Reaching-Using-Students-And-Theater) has been operating in Grand Rapids and Bemidji, Minnesota. When the project began, parental reaction was of great concern. These concerns have since been alleviated because evaluation forms completed by adults indicate overwhelming support of such education programs in the schools.

Most parents have not only been supportive of child sexual abuse prevention education efforts, they've been instrumental in advocating for incorporating programs into their communities, churches and schools. Geri Crisci, child sexual abuse prevention education consultant in Northhampton, Massachusetts, said she anticipated problems with school administration, but did not receive any, because teachers and especially parents stood behind the program. According to Crisci, these people wanted prevention taught in the schools. In Northhampton's case, it was the administrators who became nervous about sexual abuse prevention education. "Administrators are afraid of what the parents will say," Crisci said, "but when the parents are 'up' about the project, it takes the wind out of their sails."

- **"I don't think this community is ready for child sexual abuse prevention education...it's (the community) too conservative."**

Most communities we've traveled to around the country feel their community is one of the most conservative and most difficult in which to begin prevention efforts. We've found that this is the fear or concern of the organizers and that even conservative communities are interested in prevention education.

- **"Our community is anti-sex education and is concerned that child sexual abuse prevention education is sex education."**

Our program and numerous other approaches to child sexual abuse prevention education are accepted in communities which do not accept sex education. Although "sex"ual abuse prevention education initially raises eyebrows, it is a personal body safety program and not sex education. We firmly believe that accurate identification and use of sexual terminology is important so we do not give a double message to children of "it's okay to talk about *it* but we can't say what *it* is." However, it is preferable to drop such language or terms if their use will block the entire program.

- **"Child sexual abuse prevention education is too blaming of men. Children will think all men are sex offenders."**

We must recognize that women can be sex offenders, but we must face the fact that over 90% of most reported cases of sexual abuse involve men as the offender. This does not mean that most men are sex offenders, it simply means most sex offenders are male.

Again, the key is balance in our education so children understand most men won't hurt them and most touch from men in their lives (relatives, friends) is nurturing and caring.

- **"Should the program be taught by police, rape centers, advocates, teachers, clergy or parents?"**

Ideally, all of the above. Since many parents need assistance to do this education and all these professionals confront sexual abuse, they all need to develop skills in prevention education. Prevention education should not be the sole responsibility of any one agency, it should be a community effort and should be implemented in as many ways as possible. Independent of who does what, it is important to have coordination between groups. Some communities have task forces or child protection teams which are multi-disciplinary groups to handle abuse cases and/or coordinate treatment and prevention efforts. Each community varies in terms of what services they have and which group or agency is the most appropriate to conduct or coordinate such efforts.

- **"Child sexual abuse prevention education should not be the responsibility of the schools and teachers."**

Teachers are burdened with the responsibilities of the students' academic courses as well as subjects which may affect the emotional and learning development of children such as chemical dependency. Sexual abuse prevention education is sometimes seen as an added pressure. However, schools do carry a responsibility both because it is likely that the ongoing effects of sexual abuse will show up in the classroom, and because teachers have a mandatory responsibility to report when they have reasonable cause to believe that a child is being abused. It is also likely that when a child gains the courage to talk about sexual abuse, she/he will disclose to trusted people such as a favorite teacher, school counselor or nurse. It is important for teachers to have professional back-up to report and assist.

Schools are also important because it is only through the schools that information can be made available to all children. By conducting child sexual abuse prevention education, responsibility is taken off the parents; and as pointed out earlier, this is a difficult topic for many parents to discuss.

- **"Our community has treatment programs and limited financial resources, and treating existing victims has a higher priority than education programs."**

Treating victims and offenders is critically important, and treatment can help to break cycles of violence. However, prevention programs can help more children to report. More importantly, prevention programs can help minimize the need for treatment.

DEVELOP A BASIC PHILOSOPHY

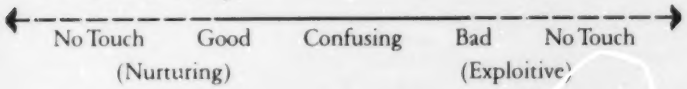
step 4

In attempting to present the program to hesitant colleagues or fearful parents, it is useful to clarify and repeat the basic concepts behind the program. It is natural for parents and concerned professionals to want to know the beliefs and assumptions on which a program operates. The following are some of the operating assumptions used by Illusion Theater.

Our approach and beliefs include:

- Sexual abuse prevention education is a safety program. Children learn about a wide variety of safety programs at a very early age; personal body safety should be added to that list.
- Children deserve to be empowered with the knowledge that they have a right:
  - to say "no" to touch or other behaviors that make them feel confused or bad
  - to ask questions when they are mixed up or confused by someone's touch or behavior
  - to trust their feelings when they are uncomfortable or "feel strange" about someone's touch or behavior
  - to not be forced or tricked into touch by which they are hurt or are told to keep secret
  - to ask for help when needed inside or outside of the family
  - to break a promise or secret when someone is being hurt as its result
  - to feel safe and be protected
  - to have some things clearly defined as "private" e.g., their very own—no one has a right to use, take or touch objects, space or body parts defined as private without our permission.
- Children need to know they don't always have to kiss Uncle Bob or Aunt Marion. We often encourage children to touch a relative or friend of the family to "be cute" or to "be polite" or to avoid hurting someone else's feelings. Children need to learn to identify and assert their boundaries. There are ways to tell someone they care, like or love them and like to be kissed, hugged or shake hands, but they don't like that person to squeeze, pick them up or tickle them too hard. It's also important to allow children to assert that sometimes they just don't want to be touched.
- We need to accept, and children need to know, that adults aren't always right.

- Children need to be informed as to whom they can turn to for help; formal and informal resources need to be identified.
- Keeping children ignorant is keeping them vulnerable.
- Children can handle receiving the information if adults can handle giving it.
- It is preferable that parents give their children this information, but many parents need assistance with how to talk to their children.
- The more children know about appropriate names for their body parts and nurturing touch, the easier it will be for them to ask questions or to talk about sexual abuse and identify exploitive or inappropriate touch.
- Most sexual abuse occurs not by force, but by trickery, manipulation and misuse of authority.
- Sexual abuse is not the victim's fault. Children need to understand that when they are "tricked" they are not at fault; the trickery is part of the sexual abuse.
- Children seldom lie about sexual abuse—we need to believe children when they say they've been victimized.
- We need to understand the *TOUCH Continuum*[1]—the difference between good touch and bad touch, and what do you do when the touch is confusing.

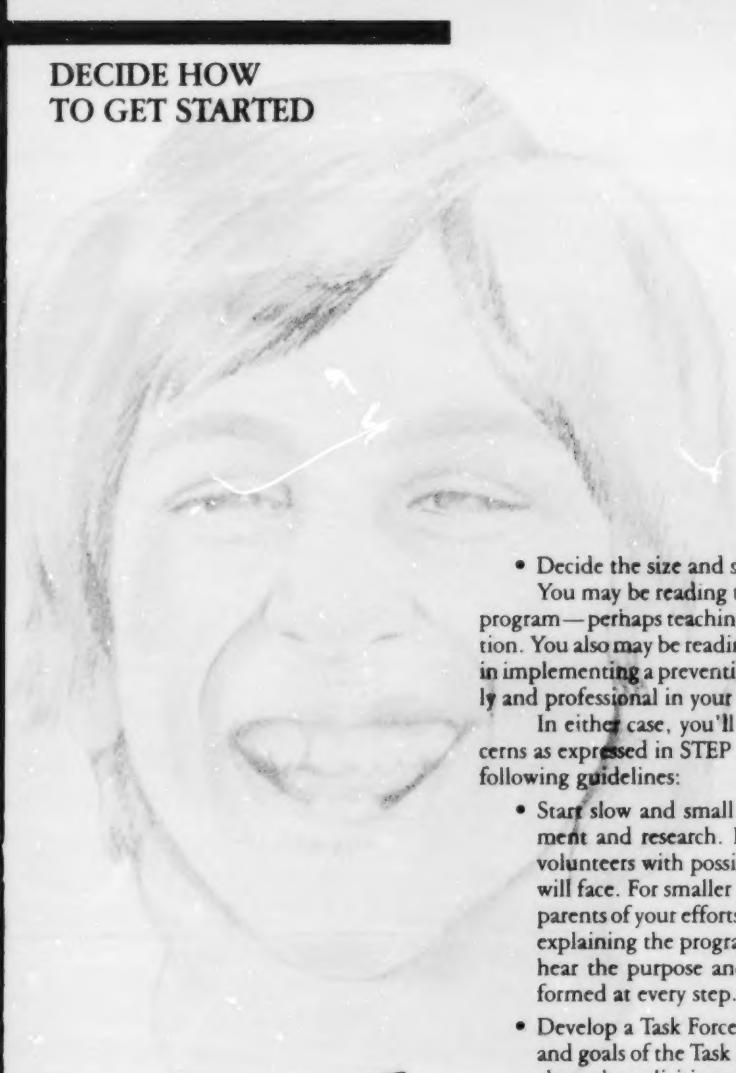


Most touch is good: that means it feels good, warm, fun or playful. Good touches may include a kiss, hug or hand shake. Some types of touch are bad: that means the touch hurts our feelings or our bodies. Bad touches may include a slap, kick or punch. Bad touch also includes sexual abuse—where the touch is tricked or forced sexual contact. Some types of touch are confusing: that means we are mixed-up about whether the touch is good or bad, but we do know that something doesn't make sense or feel right. The good or fun touches, including tickling, wrestling or "touch games" can become confusing if it doesn't feel like a game anymore or we begin to feel uncomfortable, mixed-up or hurt by the touch. Sometimes people are not used to touch, or don't like to be touched. We need to respect people's right to not be touched if they don't want to be. We also need to understand that severe deprivation of touch has some of the same effects on children as abusive touch and leaves them very vulnerable to being manipulated by what seems to be affectionate contact.

- With the high frequency of sexual abuse, it is likely that in any given group to whom we talk, some people have already been victims. Prevention efforts should include procedures and personnel that can effectively assist these victims, but it is critically important to keep in mind that prevention programs are not victim hunts. The goal is to decrease the number of people who are victims of sexual abuse and eventually move toward its prevention.
- Even if we can't stop a person from being victimized, if he or she learns that the sexual abuse has not been her / his fault, that s / he is believed, that it is useful to talk about it, and that there are people who can help, a huge step will be made. The assault may not be prevented, but years of secrecy, shame or guilt may be.

1. From the *Child Sexual Abuse Prevention Project*, Cordelia Anderson, Hennepin County Attorney's Office, 1978.

DECIDE HOW TO GET STARTED



step 5

- Decide the size and scope of your project.

You may be reading this because of your interest in starting a small program—perhaps teaching one lesson or a series on sexual abuse prevention. You also may be reading this because you or your agency is interested in implementing a prevention program which will reach every child, family and professional in your community, city or state.

In either case, you'll find yourself facing similar community concerns as expressed in STEP 3 and will need to consider some or all of the following guidelines:

- Start slow and small. Allow enough time for planning, development and research. Plan for a pilot period to acquaint staff and volunteers with possible material and with possible questions they will face. For smaller programs, the pilot period is useful to inform parents of your efforts through parental permission slips and a letter explaining the program and / or meetings where they are invited to hear the purpose and content of the program. Keep parents informed at every step.
- Develop a Task Force or Advisory Committee. The roles, purposes and goals of the Task Force or Advisory Committee should be made clear when eliciting membership. Members can help maximize the involvement of the community in the project and efficiently disseminate information. Their advice and information meetings may be monthly, quarterly or whatever best serves the project needs and members' schedules. Depending on the size of the project, Task Forces or Advisory Committees have ranged from four to 25 members. Some considerations in developing the committee are:
  - Do you want a separate committee of parents and one of professionals, or do you want to combine them?
  - Who is important for political reasons?
  - Who is important for expertise in technical assistance and information?
  - Who is important for racial, ethnic or religious representation of the community?
  - Who is important for direct assistance (time, energy, connections) to make the project happen?
  - Who is important to get involved because of their possible or probable antagonistic stance?

- For support of the program and potential membership on the committee contact local: sexual assault services; crisis centers; mental health clinics; major counseling services; state departments of welfare, education and corrections; parent teacher associations; religious organizations; police departments; legal services; community clubs and neighborhood centers; school personnel; task forces or committees which address education, safety, health, family violence, child abuse and/or sexual abuse personnel.

- **Set reasonable goals.**

Pick an attainable number of sessions, classrooms and schools in which to present the material. Keep in mind that for every presentation there is planning and follow-up time. Be prepared for the possibility that parent and community groups may request additional information and presentations. These are important for the success of your project. One of the most common problems new projects face is trying to do too much too soon. It may be necessary to postpone some requests for the following year and to create a sense of continuity through long-term planning:

- Determine your role, skills and time. Figure out any training or assistance you'll need to teach this material or organize a prevention effort.
- Use existing material and resources instead of recreating the wheel. Although there is always a need for new, updated and creative educational materials, the development of such materials is costly and time consuming. Educational resources have been developed by a wide variety of programs. Review as many of these materials as possible before tackling creation of a new resource.
- Think through all the work and tasks necessary and allot adequate time.
- Screen staff (avoid choosing staff-volunteers, actors, administrators who view the job primarily as a means to work out their own victimization).
- Consider Illusion Theater presentations (TOUCH and NO EASY ANSWERS) as a catalyst. Hundreds of communities chose to gain visibility of their agency/prevention service or to establish professional and community support for a local prevention effort by sponsoring a performance. Although sponsoring a performance is a large investment of money and time, sponsors consistently feel the effort produces substantial support for local prevention efforts and gets the information to more people. A performance generally alleviates a lot of typical fears. After a performance, common response from hesitant and skeptical audience members is, "Oh, that's how to talk about sexual abuse," "I thought it would be offensive or scary, but it's not—I don't know what I was so concerned about," "now I think they could go even further... it's not explicit enough," and "How do we get something going here?" It's useful to have evaluation forms for the audience to complete after the performance and to tabulate the comments for news releases or to document support.
- Consider professional training workshops and workshops for parents in conjunction with performances or as motivators by themselves. How to talk or teach children about sexual abuse and how to interview children who have already been victimized are possible topics. It is common for communities who sponsor a performance to also offer training workshops for parents or professionals.

- Work closely with parents. Inform parents of the project, listen to their concerns and ask for their support.
- Emphasize the fact that this is a prevention education program, a safety approach as opposed to a victim hunt or treatment program.
- If schools are not receptive, gain community support and access to children and adolescents by doing presentations at youth groups, churches, girl and boy clubs, etc. This approach, although not as thorough as reaching students and parents through schools, still allows sexual abuse prevention education information to reach large numbers of people. A probable result of such efforts is community demand for the school to do something.
- With what age of children should you start? Start with whatever age is most accessible and manageable. Children as young as preschool are appropriate recipients of child sexual abuse prevention education, however most curricula and educational materials are geared toward elementary aged students or adolescents. Depending on the scope and size of your project, it may be advisable to pick target audiences such as all third graders, or kindergarten through sixth grade in three of your eight schools, etc.
- Use publicity. Use of media may be helpful during all phases of program development unless a low profile is necessary to allow time to get established and organized.
    - Newspapers—to do feature articles on the problem of sexual abuse so the general public is aware of the problem. Some newspapers have run excellent series on the problem, national and local efforts toward treatment and prevention and guides for how parents can talk to their children.
    - Radio—for public service announcements, interviews with local experts on the problem and planned prevention efforts, and coverage of such events as conferences and public lectures.
    - Television—for public service announcements, talk shows and news coverage of events.

- **Guidelines for gaining access to schools.**

Some people feel that for a program to succeed it must be conducted from within the school system, while others say its success depends upon an outside agency. Various approaches can be and are successful, depending on the resources in the community.

If you are already a part of the school system, gaining access is not the problem. Instead, it is necessary to get permission to pilot the prevention efforts. The size and scope of your project will determine from whom you'll need to obtain permission. If you have trouble getting support, mobilize the parents. In several communities parents were not only supportive, but also extremely active in fighting for prevention programs.

If you are not employed by the school system, here are some general guidelines that could help:

- Use the media to increase awareness of the problem and need for "safety" education.
- Work with parent teacher organizations in order to increase their awareness and gain their support.
- Gain community support for the prevention efforts through churches, clubs (boy and girl scouts), Junior League, Rotary Clubs, Kiwanis, etc.

- Understand how your own local school board system works.
- Provide information or a discussion forum for the school board.
- Include key educational representatives on any Advisory Committees and planning groups.
- Start slow and small. Do not try to service an entire district at once. Design a reasonable and attainable goal.
- Train advocates outside of the school system to assist in training teachers or educating students.
- Use broad, visible educational techniques such as Illusion Theater presentations to gain interest and support.
- Begin at whatever grade or school that provides support, leadership and access.
- Use an advocate from within the system.
- Be sensitive to the fact that teachers and other school personnel may feel overloaded with all the information they are already responsible for teaching to students.
- Make sure all necessary school personnel (principals, superintendents, curriculum committee boards, teachers' support staff) understand the project and their potential role in its development and success.
- Add inservice training programs on prevention education to existing training such as treatment referral resources and the Mandatory Reporting Law.
- Inservice training topics should include frequency, identification, dynamics and cycles of child sexual abuse.
- Identify appropriate resource people to assist or conduct the training such as child protection / welfare, law enforcement or rape crisis personnel.
- When designing staff training programs, don't forget to include the cooks, kitchen workers, custodians and bus drivers. These staff people are all likely candidates for student disclosure.
- Use school curriculum committees to review, approve or develop educational materials.
- Identify the most appropriate curriculum in which to fit materials (e.g., health, safety, sexuality, family life).
- Educational materials should be clear and simple for teachers to use in the classroom.
- **Identify ways to raise necessary funds.**

Approach the community *service groups* in town—Junior League, Kiwanis, Jaycees, Jaycee Women, Lions, Rotary—and present your proposal to them. Asking many groups to pay for part of the fee is sometimes more successful than asking one group to foot the entire bill.

Approach local *businesses*. The role of businesses in combating sexual abuse and family violence through employee education and assistance and through donations to education, treatment and prevention efforts is becoming increasingly important.

Banks are another source of funds. Sometimes banks will give a project grant for the full amount, or they may underwrite part of the cost against a loss. Bankers, even though they may not give you the money outright, are usually good resources—they know where the money is in the community and may be able to suggest individuals or businesses who might donate.

Parent Teacher Organizations have sponsored Illusion Theater in their communities. They can be used to organize the fundraising drive, to solicit money and to collect the donations. Students can be persuasive fundraisers also when well directed.

One block grant for the entire amount is ideal, but *individual contributions* can quickly add up. Also, businesses may offer *inkind contributions*. A printer for instance, may print your posters free instead of giving cash. A newsaper may offer ad space, a radio station may do public service announcements.

Contacting all of these people takes a lot of leg and phone work, but by the time you have all the money raised, your contacts will have become your advertisers, promoting the project in everyday conversation. The community will have become involved in the project and interest and enthusiasm will carry through to the last performance.

PHASES IN DEVELOPING A CHILD SEXUAL ABUSE PREVENTION EDUCATION PROGRAM:

OUTLINE OF PHASES AND TRANSITIONS

Because this is from a study with the communities Illusion Theater knows best and has worked on for an extended period of time, Illusion Theater products and services are emphasized. Through all the phases, many other valuable resources may be used in developing the most appropriate local programs. It is Illusion Theater's policy to inform communities of various materials and methods available. (From Illusion Theater: *Impact Study*, August, 1982)

- **Phase 1: Internal Community Awareness of Problem of Child Sexual Abuse (CSA).** Transition #1: Advocate(s) approach prevention education concept for children.

- **Phase 2: Research and Identify Resources for Child Sexual Abuse Prevention Education (CSAPE).** Transition #2: Illusion Theater is identified as a resource.

- **Phase 3: Consultancy and Support Between Community and Illusion Theater.** Transition #3: Illusion Theater's services and / or products are requested. Illusion Theater recommends other child sexual abuse prevention education products and services.

- **Phase 4: Illusion Theater Provides Presentations, Consultations and / or Products.** Transition #4: When performances are presented in the immediate community, reaction is presented through media, meetings, etc.

- **Phase 5: Evaluation of Community Needs and Options for Child Sexual Abuse Prevention Education.** Transition #5: Local advocate or group works for local child sexual abuse prevention education program.

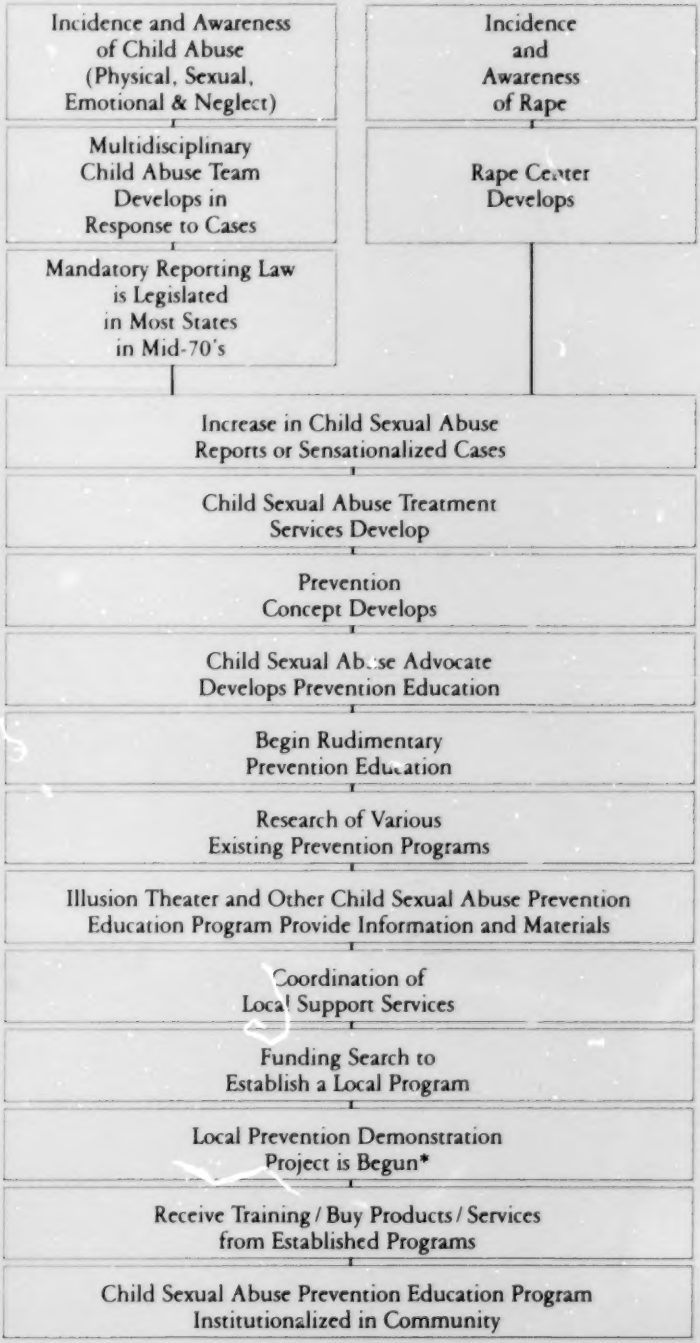
- **Phase 6: Adaptation of Various Child Sexual Abuse Prevention Education Concepts and Products to Local Community.** Transition #6: Child sexual abuse prevention education begins to be "institutionalized."

- **Phase 7: Child Sexual Abuse Prevention Education is Fully Incorporated in Local Institution.**

*Note: TOUCH or NO EASY ANSWERS performances have been used in hundreds of communities as a catalyst to their prevention efforts.

The following chart from Illusion Theater's *Impact Study* (1982) provides the general flow and development phases of prevention programs in which the Theater has been involved:

FLOW CHART OF THE GENERAL DEVELOPMENT OF A COMMUNITY CHILD SEXUAL ABUSE PREVENTION PROGRAM


Incidence and Awareness of Child Abuse (Physical, Sexual, Emotional & Neglect)
Incidence and Awareness of Rape
Multidisciplinary Child Abuse Team Develops in Response to Cases
Rape Center Develops
Mandatory Reporting Law is Legislated in Most States in Mid-70's
Increase in Child Sexual Abuse Reports or Sensationalized Cases
Child Sexual Abuse Treatment Services Develop
Prevention Concept Develops
Child Sexual Abuse Advocate Develops Prevention Education
Begin Rudimentary Prevention Education
Research of Various Existing Prevention Programs
Illusion Theater and Other Child Sexual Abuse Prevention Education Program Provide Information and Materials
Coordination of Local Support Services
Funding Search to Establish a Local Program
Local Prevention Demonstration Project is Begun*
Receive Training / Buy Products / Services from Established Programs
Child Sexual Abuse Prevention Education Program Institutionalized in Community

USE EXISTING RESOURCES

step 6

• Illusion Theater's resources that can help.

1. TOUCH and NO EASY ANSWERS. TOUCH is a play designed for children in kindergarten through grade six, parents and professionals who work with children. Audiences are shown examples of the range of touch from nurturing, to confusing to exploitive, and through dialogue with a moderator (who is a specialist in the field of sexual abuse) are asked questions about their own feelings and responses. TOUCH presents a balanced approach to touch and sexual abuse, while helping audience members think of appropriate action to take if touch or other behaviors become abusive or exploitive.

NO EASY ANSWERS is Illusion Theater's play designed for adolescents. It helps the audience think about general crime protection, concerns and questions about sexual development and the impact of media on our ideas and behavior. NO EASY ANSWERS also examines myths which surround abuse and gives a summary of what adolescents can do to protect themselves. The play also includes a moderator who engages the audience in discussion at various points of the play.

2. Licenses to perform TOUCH and NO EASY ANSWERS.

Licensing guidelines are available for groups or agencies who wish to produce Illusion Theater's original plays. Some of the requirements of the licensing agreement includes a moderator who has experience as a counselor and/or educator in the field of sexual abuse, the sponsoring agency or groups involvement in the local network of community services and bi-annual reports to Illusion Theater. Licensees may use professional, community, college or high school actors.

3. Child Sexual Abuse Prevention Project Curriculum (elementary).

Written for elementary aged children, this curriculum portrays the development of the Child Sexual Abuse Prevention Project which began in the Hennepin County Attorney's Office in 1977. It contains five sections: Backgrounds and Beginning of the Project, Teaching Guidelines, What Teachers Need, What Students Say and Activities for Teaching Sexual Abuse Prevention At Elementary Grade Levels. It will provide the reader with basic concepts, vocabulary and activities for teaching.

4. NO EASY ANSWERS Curriculum.

Designed for junior and senior high school students, this curriculum contains 20 lessons on topics such as definitions, myths/facts, themes in advertising, problem solving, assertiveness, acquaintance rape, incest, protection and prevention. It also includes findings from Illusion Theater's study on students' thoughts and feelings about sexuality and sexual abuse and teacher content sheets which contain background information and discussion points.

5. NO EASY ANSWERS Videotape.

The NO EASY ANSWERS videotape is an edited, 57-minute version of our play. It was designed as one show in a five part series on sexual abuse prevention produced by WTTW-Chicago. The show is introduced by actor Mike Farrell, who hosts the series. The tape includes responses from adolescent audience members.

6. TOUCH Film.

The TOUCH film is a screenplay version of our play for elementary-aged children. The film includes a well-known actor who moderates the play along with Illusion Theater staff. The film includes responses from children and is designed to be used with elementary students, parents and professionals.

7. Parent's Brochure: How to Talk to Your Children about Sexual Abuse.

A 9" by 18" two-color page defining sexual abuse for parents and giving basic information and guidelines about how to talk to children about it. The TOUCH Continuum is explained, as well as prevention and reporting guidelines.

8. Illusion Theater Guide for Teaching Mentally Retarded People About Sexual Abuse Prevention (MR Manual).

The MR Manual is a guide for people who work directly with mentally retarded people. Its outline, designed for educating moderate to high functioning people is based on TOUCH Continuum concepts, the Child Sexual Abuse Prevention Project and Illusion Theater's field experience in working with mentally retarded populations in the Dungarvin Group Homes in Saint Paul, Minnesota where the material was both piloted and tested. Emphasis is on *role plays*, relating of general sexual abuse prevention information and the development of practical skills.

9. Illusion Theater Project TRUST Manual: A Model for School Districts to Adapt TOUCH and the Child Sexual Abuse Prevention Curriculum Using High School Actors (TRUST MANUAL).

The TRUST Manual contains guidelines for school districts to develop a prevention program based on Illusion Theater's TOUCH performance and the concepts outlined in the Child Sexual Abuse Prevention Education Curriculum. This adaptation was piloted in the Grand Rapids and Bemidji, Minnesota school districts in 1981-82. This model requires high school students as actors with a sexual abuse specialist as moderator.

10. TOUCH Study Cards.

A set of thirteen 22" *by 14"* poster-sized, multi-color cards which illustrate the range of touch and scenes from TOUCH and NO EASY ANSWERS. Instructional copy for teachers is printed on the back of each card.

• Other Resources that Can Help

These resources are *samples* of a wide variety of innovative and effective prevention materials recently developed by individuals or programs which also have other resources available.

1. Books and Manuals.

Bateman, Py, *Fear Into Anger, A Manual of Self-Defence for Women*, Nelson-Hall, Chicago, Illinois, 1978.

Bateman, Py, *Acquaintance Rape Awareness and Prevention*, available from Alternatives to Fear, 101 Nickerson, Suite 250, Seattle, Washington, 98109, 206/282-0177.

Bateman, Py, *Parent / Child Self-Protection: Alternative to Fear,* available from Alternatives to Fear, 101 Nickerson, Suite 250, Seattle, Washington, 98109, 206/282-0177.

Burgess, A.W.; A.N. Groth, L.L. Holstrom and S.M. Sgroi, *Sexual Assault of Children and Adolescents,* D.C. Heath and Company, Lexington, Massachusetts, 1978.

Groth, A. Nicholas, *Men Who Rape, The Psychology of the Offender,* Plenum Publishing Corporation, 227 West 17th Street, New York, New York, 10011.

Minnesota Program for Victims of Sexual Assault, *Incest: Confronting The Silent Crime, A Manual For Educators, Law Enforcement, Medical, Human Services And Legal Personnel,* a project of the Minnesota Department of Corrections, 430 Metro Square Building, Saint Paul, Minnesota, 55101, 612/296-7084.

Tschirhart Sanford, Linda, *The Silent Children: A Parent's Guide to the Prevention of Child Sexual Abuse,* Doubleday and Company, New York, New York, 1980.

2. Curricula.

CHILD SEXUAL ABUSE PREVENTION PROJECT: AN EDUCATION PROGRAM FOR CHILDREN, Cordelia Anderson, and SEXUAL ASSAULT: A MANUAL FOR LAW ENFORCEMENT, MEDICAL, SOCIAL SERVICES, VOLUNTEERS AND PROSECUTIONAL PERSONNEL AND AGENCIES. Sexual Assault Services, Hennepin County Attorney's Office, C-2000 Government Center, Minneapolis, Minnesota, 55487, 612/348-5397.

CURRICULUM FOR DEVELOPING AN AWARENESS OF SEXUAL EXPLOITATION AND TEACHING SELF-PROTECTION TECHNIQUES, Ellen Ryerson, Seattle Rape Relief, 1825 Jackson, #102, Seattle, Washington, 98144.

CURRICULA FOR THE PREVENTION OF CHILD SEXUAL ABUSE (for use with more advanced or less advanced students), Carol A. Plummer, Project Director, Education for the Prevention of Child Sexual Abuse, Beidgework Theater, 113½ Lincoln, #3, Goshen, Indiana, 46526.

NO EASY ANSWERS: SEXUAL ABUSE PREVENTION EDUCATION FOR JUNIOR AND SENIOR HIGH SCHOOL STUDENTS, Cordelia Anderson, Illusion Theater, Hennepin Center for the Arts, 528 Hennepin Avenue South, Suite #205, Minneapolis, Minnesota, 55403, 612/339-4944.

PERSONAL SAFETY CURRICULUM, Geraldine A. Crisci, MSW, 150 River Drive, Hadley, Massachusetts, 01035, 413/586-3663.

PERSONAL SAFETY CURRICULUM FOR PREVENTION OF CHILD SEXUAL ABUSE, For Headstart Children, K-2, 3-4, 5-6, Junior High and Senior High, all available from Tacoma Public Schools, Skyline Elementary School, 2301 North Mildred, Tacoma, Washington, 98406, 206/752-6689.

SEXUAL ABUSE PREVENTION: A MANUAL FOR TRAINERS, Judy Little, Project Director, Alamance-Caswell Area Mental Health - Mental Retardation Program, Burlington, North Carolina, 407 South Broadway Street, Burlington, North Carolina, 27215.

SEXUAL ABUSE EDUCATION FOR DISABLED ADOLESCENTS PROJECT CURRICULUM, Bonnie O'Day, Minnesota Program for Victims of Sexual Assault, 430 Metro Square Building, Saint Paul, Minnesota, 55101.

STRATEGIES FOR FREE CHILDREN: A LEADER'S GUIDE TO CHILD ASSAULT PREVENTION, Linda Tschirhart Sanford, Child Assault Prevention Project, P.O. Box 02084, Columbus, Ohio, 43202, 614/291-9751, cost $18.50.

3. Films.

He Told Me Not to Tell and *Who Do You Tell?*, Motorola Teleprograms, Inc., 3710 Commercial Avenue, Northbrook, Illinois, 60062, 800/323-5343 and 4825 North Scott Street, Schiller Park, Illinois, 60176.

Acquaintance Rape Prevention (Series), *A Night Out, Domestic Violence Series, In Need of Special Attention: Treating Battered Women in the Emergency Room, No More Secrets, About No More Secrets* (videocassette), O.D.N. Productions, Inc., 74 Varick Street, Suite 304, New York, New York, 10013, 212/431-8923.

TOUCH, Illusion Theater and Media Ventures, Incorporated.

4. Videotapes.

It's Not Like Scraping Your Knee: Four Women's Stories of Sexual Abuse, GENESIS II, 310 East 38th Street, Minneapolis, Minnesota, 55409, 612/348-2762.

No Easy Answers, Illusion Theater, Hennepin Center for the Arts, 528 Hennepin Avenue, Minneapolis, Minnesota, 55403, 612/339-4944.

5. Booklets.

Child Sexual Abuse Prevention: How To Take The First Steps, Illusion Theater, Hennepin Center for the Arts, 528 Hennepin Avenue South, #205, Minneapolis, Minnesota 55403, 612/339-4944.

Come Tell Me Right Away, A Positive Approach, Linda Tschirhart Sanford, adapted from her book; *The Silent Children: A Parent's Guide to the Prevention of Child Sexual Abuse*, ED-U Press, P.O. Box 583, Fayetteville, New York, 13066.

He Told Me Not To Tell, King County Rape Relief, 305 South 43rd, Renton, Washington, 98055, 206/226-5062.

Kids Go To Court Too—What You Will See and Do, Hennepin County Attorney's Office, Sexual Assault Services, 2000C Government Center, Minneapolis, Minnesota, 55487.

Are Children with Disabilities Vulnerable to Sexual Abuse? Minnesota Program for Victims of Sexual Assault, 430 Metro Square Building, Saint Paul, Minnesota 55101, 612/296-0154.

No More Secrets, Caren Adams and Jennifer Faye, Impact Publishers, San Luis Obispo, California, 93406.

A Parent's Resource Booklet, It's My Body Children's Booklet, Planned Parenthood of Snohomish County, 2730 Hoyt Avenue, Everett, Washington, 98201.

So You Don't Want to Be a Sex Object and *They've Changed the Combination*, Rocky Mountain Planned Parenthood, General Sexuality / Decision Making for Adolescents.

Top Secret, Sexual Assault Information for Teenagers Only, Jennifer Faye and Billie Jo Fletchinger, King County Rape Relief, 305 Renton, Washington, 98055, 206/226-5062.

6. Miscellaneous.

My Personal Safety Coloring Book, Fridley Police Department, 6431 University Avenue Northeast, Fridley, Minnesota, 55432.

Red Flag, Green Flag Coloring Book, Joy Williams, Rape and Abuse Crisis Center of Fargo-Moorhead, P.O. Box 1655, Fargo, North Dakota, 58107, 701/293-7373.

Touch and Sexual Abuse: How to Talk to Your Children About It, Illusion Theater, Hennepin Center for the Arts, 528 Hennepin Avenue South, #205, Minneapolis, Minnesota, 55403, 612/339-4944.

TOUCH Continuum Study Cards, Illusion Theater, Hennepin Center for the Arts, 528 Hennepin Avenue South, #205, Minneapolis, Minnesota, 55403, 612/339-4944.

TOUCH Continuum Study Cards adapted for use with preschoolers, Joanne Corbett, Program Coordinator, Beltrami County Sexual Assault Task Force, P.O. Box 1112, Bemidji, Minnesota 56601, 218/751-4310.

THINK ABOUT EVALUATION

How many cases of child sexual abuse did we prevent? This is a question we'll never be able to answer, nor have we had the financial or personal resources to do short-term, much less long-term follow-up with the over 280,000 people who've already participated in our prevention presentation.

Pre- and post-knowledge and attitude tests are used by several programs. Whenever this type of evaluation is done with children, careful design of the questions is necessary to guarantee that they comprehend the questions being asked and that the questions truly get at the information the evaluator wants. Better tests still need to be developed. With or without formal tests, it is useful to repeat a consistent series of questions at the beginning and ending of lessons to assess change in student's understanding and comprehension. Aside from the general evaluations we do (e.g., What did you like best? What did you learn? What needs to be added or deleted? etc.), our theatrical model encourages audience response during the performances as a way for them to ask questions and explain to us what they saw happening. This simple dialogue helps us to assess if our messages are clear and to react to the range of knowledge and attitudes in any given audience.

Mini-impact studies were completed as part of a Health and Human Service-National Center on Child Abuse and Neglect (HHS-NCCAN) grant to five other sites with whom Illusion Theater coordinated and consulted to develop child sexual abuse prevention education programs. These sites' impact studies addressed the following questions:

- *Bridgework Theater, Goshen, Indiana*—What was the local social service networks' reaction to Bridgework's prevention efforts?
- *ODN Productions, New York*—What were the reactions of parents, teachers and children to their new film for children entitled "NO MORE SECRETS"?
- *Community Mental Health Center, Northampton, Massachusetts*—What did children comprehend from their puppet production "WHAT SHOULD I DO"? What were the differences between the Hispanic and American children?
- *Community Mental Health Center, Burlington, North Carolina*—Did parents read their booklet "SEXUAL ABUSE—A GUIDE FOR YOUR CHILD'S SAFETY" and did they talk about it?

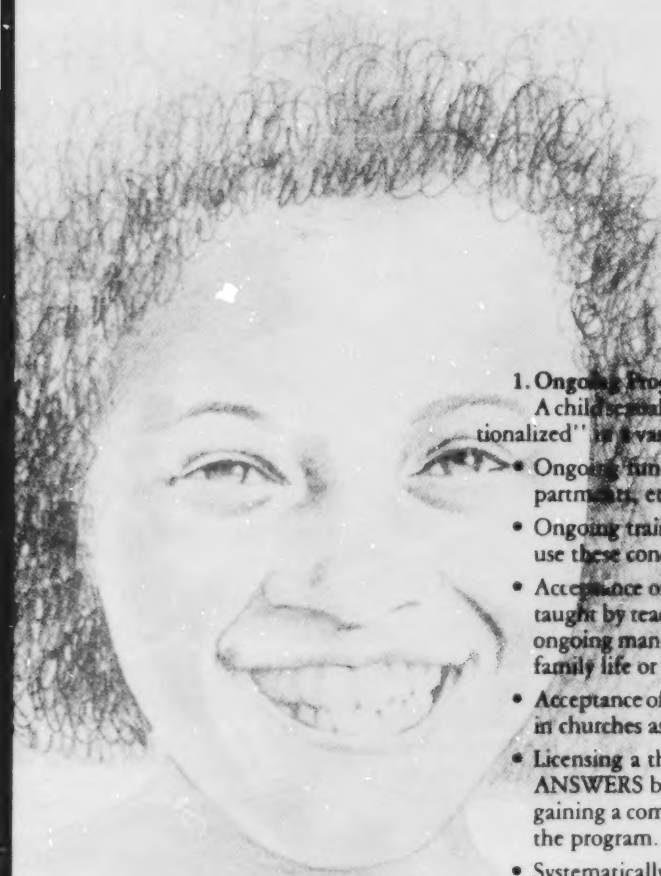
- *Tacoma Public Schools, Tacoma, Washington*—Did the teachers trained in their curriculum follow through and teach it?
- *Illusion Theater, Minneapolis, Minnesota*—What was the impact of our presentations, training and materials in a community's prevention efforts?

Despite all these types of evaluations, there is a clear need for systematic evaluation of the short-term and long-term effects of prevention efforts.

Much of our evaluation information and feedback is very piecemeal. Through the grapevine we often hear things such as "my friend didn't think her 4½-year old comprehended much from TOUCH, but a few weeks later he explained that he didn't like going over to his father's because of bad touch he didn't like," which turned out to be sexual abuse. Through a therapist who works with juvenile sex offenders, we were informed of a boy who was receiving therapy after a child who saw TOUCH went home and reported the sexual abuse which had occurred. When asked by her mother what she thought of TOUCH, a young girl responded that what happened in the play is what her babysitter did to her, but that she didn't know how to talk about it before. Perhaps even more important are reports from children stating that because of child sexual abuse prevention education they knew they could say "no" and tell someone about an attempted incident. Others reported they now clearly understand they do not have the right to force or manipulate another person into sexual contact.

Although this feedback is not scientific evaluation, it affirms that the prevention efforts are on the right track.

MOVE TOWARD PREVENTION



step 8

1. **Ongoing Program.**

A child sexual abuse prevention education program can be "institutionalized" in a variety of ways, such as:

- Ongoing funds for rape centers, mental health centers, police departments, etc. to continue conducting educational efforts.
- Ongoing training for a wide variety of professionals to continually use these concepts in their daily work.
- Acceptance of child sexual abuse prevention education curriculum taught by teachers, nurses, counselors or police liaison officers as an ongoing mandatory component of existing curricula, such as safety, family life or health.
- Acceptance of a child sexual abuse prevention education curriculum in churches as part of Sunday school or youth groups.
- Licensing a theatrical performance such as TOUCH or NO EASY ANSWERS by community, professional or high school actors, and gaining a commitment for the schools and community to maintain the program.
- Systematically reaching as many parents as possible through public service announcements, churches and community groups to teach them how to talk to their children.

Generally, the reasons child sexual abuse prevention education efforts falter or fail is not because of lack of support from parents or negative response from the community. The reasons for failure are often less dramatic:

- Lack of funds
- Staff burnout
- Lack of community network (one agency tries to do it all)
- Change or loss of key staff at a vulnerable point in the program's development
- Internal staff problems
- Attempts to do too much too soon
- Growing too fast to stay or fit within the parent organization
- Lack of long-range planning
- Loss of active political or popular support because prevention of child sexual abuse fades as a priority issue.

2. The Bigger Social Step Toward Prevention.

Even with an institutionalized (ongoing) child sexual abuse prevention education program that addresses both awareness and skills, we need to challenge ourselves to think about what else is necessary to prevent sexual abuse.

An exercise we use in our NO EASY ANSWERS curriculm is:

If all sex offenders (people who forced, tricked or manipulated other people into sexual contact) turned green at 4:00 PM today and were captured and either "fixed" or locked away forever, we would be protected from sexual assault, because all offenders would be gone. Think about what we would need to prevent a whole new group of people from becoming offenders.

Although the right answer(s) to this are not known, we believe to truly move toward prevention of sexual abuse we must:

- increase public awareness of what sexual abuse and exploitation are and emphasize that they are not okay...they are not an acceptable form of sexuality or sexual expression
- stop ignoring or condoning the sexual, physical and emotional abuse and neglect of children...accept that children have rights to be nurtured and protected by adults—not abused
- stop condoning violence and increase the awareness of differences between healthy sexuality and the abusive use of sex
- challenge racism which perpetuates the oppression of people of color and encourages a power imbalance in which people continue to be degraded and abused
- increase people's understanding of the importance of emotionally and physically nurturing children, encourage them to accept positive touch and not accept exploitive or abusive touch
- challenge exploitive and violent media messages that perpetuate sexual abuse by glamorizing violence and dehumanizing women and children
- continue to combat the sex roles and sexism that too often set men up to be offenders and women to be victims.

CLOSING

Any step you take to educate yourself, your children, your colleagues, your students or your community about child sexual abuse prevention is a step toward prevention of sexual abuse.

These steps are often steep and require your strength and commitment. Therefore, a big problem for advocates of child sexual abuse prevention education programs is burnout. To avoid this, remember to do the same thing as we tell the children to do:

- Talk to others
- Be assertive
- Know your boundaries, limits and strengths
- Know your resources so you can ask for help
- Know you can have an impact

We wrote "Taking the First Steps" in a sincere effort to share our experiences, resources and support. It is a guide that we hope will help you to take action toward prevention.

GOOD LUCK

PREVENTION CONTACTS

There are hundreds of prevention programs operating throughout the country. Although we cannot list every one here, the following are samples of prevention contacts which can help identify other resources.

Alternatives to Fear, 101 Nicholson, Suite 150, Seattle, Washington, 98109, 206/282-0177. Contact: Py Bateman.

Bubbylonian Productions, Junior League of Kansas City, P.O. Box 2485, Kansas City, Kansas, 66110, 913/364-7738. Contact: Helen Swan.

Child Assault Prevention Project Women Against Rape, P.O. Box 02084, Columbus, Ohio, 43202, 614/221-4447 (crisis line), 614/291-9751 (information line). Contact: Sally Cooper.

Child Sexual Abuse Prevention, 150 River Drive, Hadley, Massachusetts, 01035, 413/586-3663. Contact: Geri Crisci.

Child Sexual Abuse Prevention (Bridgework Theater), P.O. Box 421, Kalamazoo, Michigan, 49005-0421, 616/349-9072. Contact: Carol A. Plummer.

Clayton County Department of Family and Childrens Services, 129 King Street, Jonesboro, Georgia, 30236, 404/478-0295. Contact: Kathryn Flanagan.

Didi Hirsch Community Mental Health Center, 4760 South Sepulvade Boulevard, Culver City, California, 90230, 213/390-6612. Contact: Emilia Bellone.

Illusion Theater, 528 Hennepin Avenue South, Suite #205, Minneapolis, Minnesota 55403, 612/339-4944. Contact: Cordelia Anderson.

King County Rape Relief, 305 South 43rd, Renton, Washington, 98055, 206/226-RAPE. Contact: Mary Ellen Stone.

Knoxville Institute for Sexual Assault and Treatment and Training, 2602 East 5th Avenue, Knoxville, Tennessee, 37914. Contact: Charlie Gentry.

Rape Crisis Center of Syracuse, Inc., 423 West Onondage Street, Syracuse, New York, 13202, 315/422-7273. Contact: Pat Fletcher.

Sexual Abuse Treatment Unit, Coastal Community Counseling Center, 482 Washington Street, Braintree, Massachusetts, 02184, 617/849-1220. Contact: Linda Tschirhart Sanford.

Tacoma Public Schools, Skyline Elementary School, 2301 North Mildred, Tacoma, Washington, 98406, 201/752-6689. Contact: Marlyn Olson.

YWCA Rape Crisis Center, 222 East 17th Street, Cheyenne, Wyoming, 307/634-2541. Contact: Sandy Minnich.

Minnesota Program for Victims of Sexual Assault (for members of Rape Centers throughout the State), 430 Metro Squre Building, Saint Paul, Minnesota 55101, 612/296-1306. Contact: Peggy Specktor.

BIBLIOGRAPHY AND RESOURCES

Anderson, Cordelia, *Child Sexual Abuse Prevention Project* curriculum, Hennepin County Attorney's Office, Minneapolis, Minnesota, 1979.

Anderson, Cordelia, *No Easy Answers Secondary Curriculum on Sexual Abuse Prevention*, Illusion Theater, Minneapolis, Minnesota, 1983.

Burgess, Ann; Groth, A. Nicholas; Holstrom, Lynda and Suzanne Sgroi, *Sexual Assault of Children and Adolescents*, Lexington, Massachusetts, Lexington Books, 1978.

De Francis, Vincent, *Protecting the Child Victim of Sex Crimes Committed by Adults*, Denver, Colorado, American Humane Association, 1969.

Finkelhor, David, *Public Knowledge and Attitudes about Child Sexual Abuse: A Boston Survey*, paper presented to the National Conference on Child Sexual Abuse, Washington, D.C., 1982.

Finkelhor, David, *Sexually Victimized Children*, New York, Free Press, 1979.

King County Rape Relief, *He Told Me Not To Tell*, Renton, Washington, 1979.

Illusion Theater, *Impact Study*, prepared for the National Center on Child Abuse and Neglect Child Sexual Abuse Prevention Grant, 1982.

Landis, J., *Experience of 500 Children with Adult Sexual Deviants*, Psychiatric Quarterly Supplement, 1956, 80:91-109.

Minnesota Program for Victims of Sexual Assault, *Incest: Confronting the Silent Crime*, Saint Paul, Minnesota.

National Center on Child Abuse and Neglect, *Study Findings: National Study of the Incidence and Severity of Child Abuse and Neglect*, Washington, D.C., United States Department of Health and Human Services, 1981.

Russell, Diane, *Preliminary Report on Some Findings Relating to the Trauma and Long-Term Effects of Intrafamilial Childhood Sexual Abuse*, paper presented to the Conference on Child Prostitution and Pornography, Boston, 1981.

Sanford, Linda Tschirhart, *The Silent Children*, Garden City, New Jersey, Doubleday, 1980.